

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. FILING DATE

APPLICANT(S) 09/485820

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1	/		/				51			
2	/						52			
3		/					53			
4		/					54			
5		/					55			
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46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2		1				TOTAL IND.			
TOTAL DEP.	14		2				TOTAL DEP.			
TOTAL CLAIMS	16		3				TOTAL CLAIMS			

PTO-1280 (2-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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